1. CONTROL NO. CONSIGNMENT CONTROL SHEET For use of this form, see AR 215-4; the proponent agency is ODCSPER **SECTION A - TICKETS RECEIVED** 2. NAME OF EVENT 5. NAME OF VENDOR 3. QUANTITY RECEIVED 4. DATE OF CUT-OFF **SECTION B - TICKET SALES** NUMBER SEQUENCE OF TICKETS DESCRIPTION **EXTENDED** OF EVENT 8 QUANTITY **UNIT COST** TOTAL 6. DATE OF EVENT то FROM 10 11 **SECTION C - RECEIPT CERTIFICATION** 5. I Acknowledge Receipt of The Tickets Listed Above. a. SIGNATURE OF NAFI REPRESENTATIVE b. DATE **SECTION D - TICKETS RETURNED** 12. NAME OF EVENT 15. NAME OF VENDOR 13. QUANTITY RECEIVED 14. DATE OF CUT-OFF 16. RETURN TICKETS NUMBER SEQUENCE OF DESCRIPTION OF EVENT TICKETS DATE OF EVENT EXTENDED TOTAL QUANTITY **UNIT COST** FROM TO **SECTION E - RETURN CERTIFICATION** 17. I Acknowledge Receipt of The Tickets Listed Above. a. SIGNATURE OF VENDOR REPRESENTATIVE b. DATE 18. ATTACH CERTIFIED MAIL RECEIPT AND RETURN TO NAFI (Use only if 17a and b, are not used)